



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2581

<b>SERIAL NUMBER</b> 10/034,686	<b>FILING DATE</b> 12/27/2001 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3762 3763	<b>ATTORNEY DOCKET NO.</b> 38943.1.1.1
------------------------------------	---	---------------------	---------------------------------------	---

**APPLICANTS**  
James L. Pokorney, Northfield, MN;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CON OF 09/045,441 03/20/1998  
WHICH CLAIMS BENEFIT OF 60/041,558 03/21/1997

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
none

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY \*\***  
\*\* 01/26/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 11	<b>INDEPENDENT CLAIMS</b> 3
---	-------------------------------	----------------------------	---------------------------	--------------------------------

35 USC 119 (a-d) conditions met  
☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged  
Examiner's Signature: [Signature] Initials: [Initials]

**ADDRESS**  
Fredrikson & Byron, P.A.  
1100 International Centre  
900 2nd Avenue South  
Minneapolis, MN 55402-3397

**TITLE**  
High pressure syringe

<b>FILING FEE RECEIVED</b> 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---